

FILE NOTATIONS

Entered in NID File
Location Map Pinned
Card Indexed

Checked by Chief
Approval Letter 10-2-67
Disapproval Letter

COMPLETION DATA:

Date Well Completed 11-23-67

Location Inspected

W..... WW..... TA.....

Bond released

GW..... OS..... PA.....

State or Fee Land

LOGS FILED

Driller's Log 1-22-70

Electric Logs (No.) 4

E..... I..... Dual I Lat..... GR-N..... Micro.....

BHC Sonic GR..... Lat..... Mi-L..... Sonic.....

CBLog..... CCLog..... Others.....

STATE OF UTAH

OIL & GAS CONSERVATION COMMISSION

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. TYPE OF WORK

DRILL ☒DEEPEN ☐PLUG BACK ☐

b. TYPE OF WELL

OIL WELL ☒GAS WELL ☐OTHER ☐SINGLE ZONE ☐MULTIPLE ZONE ☐

2. NAME OF OPERATOR

KIMBARK OPERATING CO.

3. ADDRESS OF OPERATOR

288 CLAYTON STREET, DENVER, COLORADO 80206

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)

At surface

NESE 660' FROM E LINE, 3300' FROM N LINE
1980' S C NE SE

At proposed prod. zone

14. DISTANCE IN MILES AND DIRECTION FROM NEAREST TOWN OR POST OFFICE*

HANKSVILLE - 7 MILES

15. DISTANCE FROM PROPOSED* LOCATION TO NEAREST PROPERTY OR LEASE LINE, FT. (Also to nearest drlg. line, if any)

660

16. NO. OF ACRES IN LEASE

160

18. DISTANCE FROM PROPOSED LOCATION* TO NEAREST WELL, DRILLING, COMPLETED, OR APPLIED FOR, ON THIS LEASE, FT.

19. PROPOSED DEPTH

3000' - PWR

21. ELEVATIONS (Show whether DF, RT, GR, etc.)

4570 G.L.

Whiterim Test

23.

PROPOSED CASING AND CEMENTING PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH
12 1/4	10-3/4	40.5	250
7-7/8	4 1/2	9.5	T.D.

- 1) Need NID & survey plat out Fred Deane well
- 2) Need information on blowout prevention equipment
- 3) Need estimated Geyser top
- 4) Check on bond with Gail Parris

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: If proposal is to deepen or plug back, give data on present production zone. If proposal is to drill or deepen directionally, give pertinent data on subsurface locations and measures and blowout prevention program, if any.

24.

SIGNED

W. R. Rumble

TITLE

PRESIDENT

(This space for Federal or State office use)

PERMIT NO.

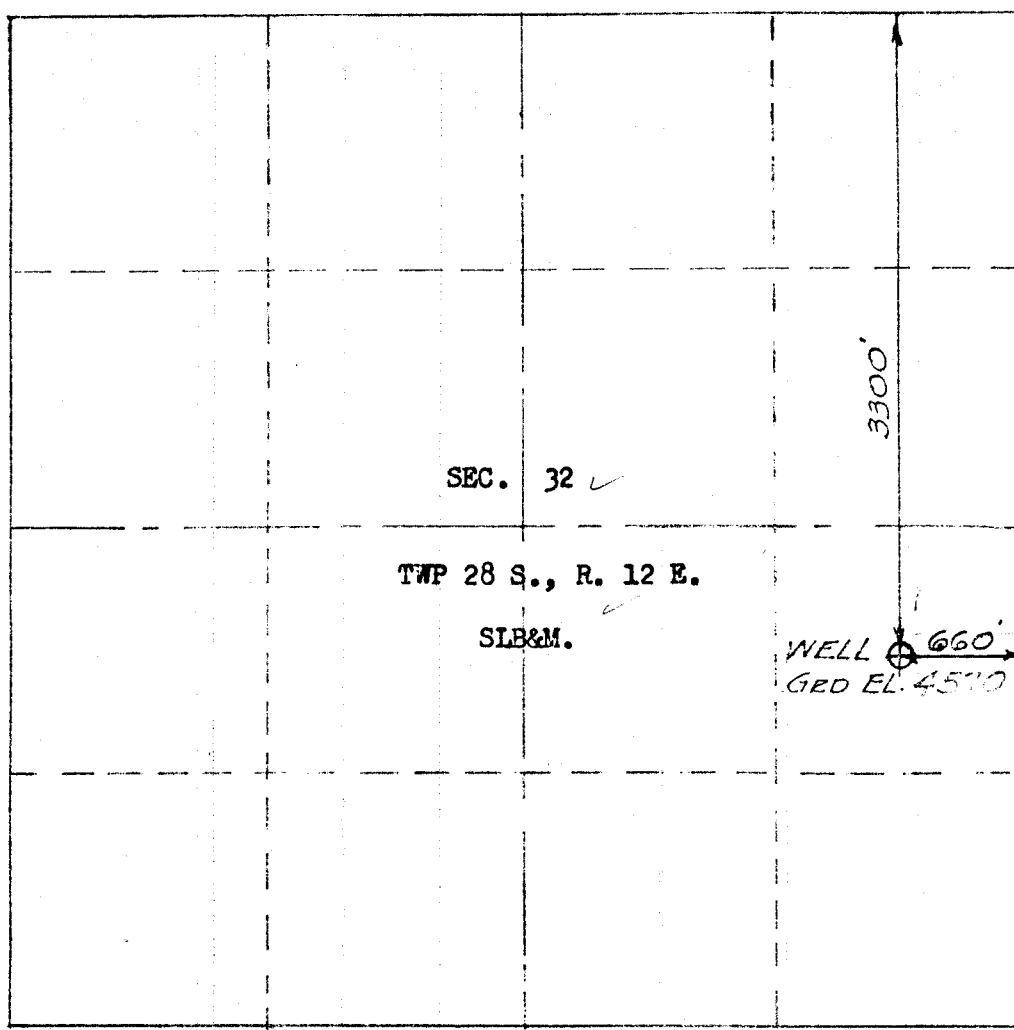
43-055-30004

APPROVAL DATE

APPROVED

TITLE

CONDITIONS OF APPROVAL, IF ANY:



SCALE 1"=1000'

SURVEYORS CERTIFICATE

I, GEORGE H. NEWELL A REGISTERED LAND SURVEYOR AS PRESCRIBED BY THE LAWS OF THE STATE OF UTAH, AND HOLDING CERTIFICATE NO. 1770, CERTIFY THAT THIS PLAT OF A LOCATION MADE BY ME OF KIMBARK OPERATING COMPANY ~~FEDERAL~~ BUCK CANYON NO. 1 WELL AND MORE SPECIFICALLY DESCRIBED AS FOLLOWS:

3300 FEET FROM THE NORTH LINE AND 660 FEET FROM THE EAST LINE OF SECTION 32, T. 28 S., R. 12 E., SLB&M. GROUND ELEVATION 4570.

IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

DATE September 30, 1969

George H. Newell
George H. Newell

DESIGNATION OF OPERATOR

State Land Board, State of Utah

The undersigned is, on the records of the ~~Bureau of Land Management~~, holder of leaseDISTRICT LAND OFFICE: Salt Lake City, Utah
SERIAL No.: ML No. 24139

and hereby designates

NAME: Kimbark Operating Co., a Colorado Corporation
ADDRESS: 288 Clayton Street
Denver, Colorado 80206
itsas ~~his~~ operator and local agent, with full authority to act in ~~his~~ behalf in complying with the terms of the lease and regulations applicable thereto and on whom the supervisor or his representative may serve written or oral instructions in securing compliance with the Operating Regulations with respect to (describe acreage to which this designation is applicable): Wayne County, UtahTownship 28 South, Range 12 East, SLM

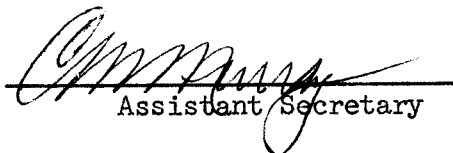
Section 32: NE/4 SE/4

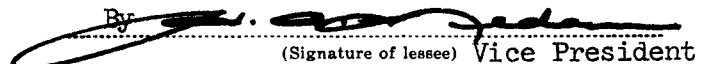
It is understood that this designation of operator does not relieve the lessee of responsibility for compliance with the terms of the lease and the Operating Regulations. It is also understood that this designation of operator does not constitute an assignment of any interest in the lease.

In case of default on the part of the designated operator, the lessee will make full and prompt compliance with all regulations, lease terms, or orders of the ~~Secretary of the Interior~~ or his representative, ~~Oil and Gas Conservation Commission~~ of the State of Utah

The lessee agrees promptly to notify the supervisor of any change in the designated operator.

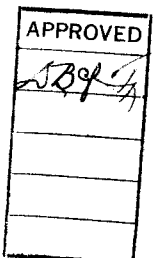
ATTEST:

AMERADA HESS CORPORATION, FORMERLY NAMED
AMERADA PETROLEUM CORPORATION

Assistant Secretary

By 
(Signature of lessee) Vice President
AMERADA DIVISION

September 12, 1969
(Date)

P. O. Box 2040, Tulsa, Oklahoma 74102
(Address)



October 7, 1969

Kimbark Operating Company
288 Clayton Street
Denver, Colorado 80206

Re: Well No. State Buck Canyon #1
Sec. 32, T. 28 S, R. 12 E,
Wayne County, Utah

Gentlemen:

Insofar as this office is concerned, approval to drill the above mentioned well is hereby granted. However, this approval is conditional upon this office receiving more detailed information concerning the well's blowout equipment and the estimated geologic tops.

Should you determine that it will be necessary to plug and abandon this well, you are hereby requested to immediately notify the following:

PAUL W. BURCHELL - Chief Petroleum Engineer
HOME: 277-2890 - Salt Lake City
OFFICE: 328-5771

This approval terminates within 90 days if the well has not been spudded-in within said period.

Enclosed please find Form OGC-8-X, which is to be completed whether or not water sands (aquifers) are encountered while drilling. Your co-operation with respect to completing this form will be greatly appreciated.

The API number assigned to this well is 43-055-30004 (see Bulletin D-12 published by the American Petroleum Institute).

Very truly yours,

DIVISION OF OIL & GAS CONSERVATION

CLEON B. FEIGHT
DIRECTOR

CBF:sd
Enclosures

cc: Division of State Lands

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER DRY		5. LEASE DESIGNATION AND SERIAL NO. ML-24139
2. NAME OF OPERATOR KIMBARK OPERATING CO.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 288 CLAYTON STREET, DENVER, COLORADO 80206		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NESE, 660 FROM E LINE AND 3300 FROM N LINE		8. FARM OR LEASE NAME STATE BUCK CANYON
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4580 K.B.		10. FIELD AND POOL, OR WILDCAT WILDCAT
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 32-28S-12E
		12. COUNTY OR PARISH WAYNE
		13. STATE UTAH

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

1. T.D. 2524
2. SURFACE CASING, 10-3/4", 40.5# AT 241' CEMENTED WITH 175 SACKS.
3. PLUGGED AS FOLLOWS:
 2473-2373 - 100 SACKS
 2034 - 1934 - 100 SACKS
 976-876 - 100 SACKS
 269-53 - 50 SACKS
 TOP - CEMENT AND MARKER

18. I hereby certify that the foregoing is true and correct

SIGNED

[Signature]

TITLE

PRESIDENT

DATE DECEMBER 4, 1969

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

PLUGGING PROGRAM FORM

Name of Company: Gimbark Operating Well Name: Sx. Buck Canyon #1
Verbal Approval Given To: Elliott Rogers Sec. 32 T 29S R 12E County: Utah

Verbal Approval Was Given To Plug the Above Mentioned Well In The Following Manner:

T.D. 2530'

100' plug across White Rim
30' below the top
70' above " "


100' plug across the top of Moenkopi
100' plug across the top of Kayenta

50 sacks at the base of surface casing

244' of 10³/₄" casing

10 sacks at surface, marker,
mud between all plugs

Date Verbally Approved: 11-21-69

Signed: Schmitt 

1588 West North Temple
Salt Lake City, Utah 84116
328-5771
January 12, 1970

Kimbark Operating Company
288 Clayton Street
Denver, Colorado 80206

Re: Well No. State Buck Canyon #1
Sec. 32, T. 28 S, R. 12 E,
Wayne County, Utah

Gentlemen:

This letter is to advise you that the "Well Completion or Recompletion Report and Log" for the above mentioned well is due and has not been filed with this office as required by our rules and regulations.

Please complete the enclosed Forms OGC-3, "Well Completion or Recompletion Report and Log", in duplicate and forward them to this office as soon as possible.

Thank you for your cooperation in this request.

Sincerely,

DIVISION OF OIL & GAS CONSERVATION

SHARON CAMERON
RECORDS CLERK

sc

SUBMIT IN DUPLICATE*

(See other instructions on reverse side)

STATE OF UTAH
OIL & GAS CONSERVATION COMMISSION

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____

b. TYPE OF COMPLETION:

NEW WELL ☐ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other P&A

2. NAME OF OPERATOR

KIMBARK OPERATING CO.

3. ADDRESS OF OPERATOR

288 CLAYTON STREET, DENVER, COLORADO 80206

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface NESE, 660 FROM E LINE AND 3300 FROM N LINE

At top prod. interval reported below (NONE)

At total depth APPROXIMATELY SAME

14. PERMIT NO.

DATE ISSUED

12. COUNTY OR PARISH
WAYNE13. STATE
UTAH

15. DATE SPURRED

11-13-69

16. DATE T.D. REACHED

11-23-69

17. DATE COMPL. (Ready to prod.)

11-23-69 (DRY HOLE)

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

4570 G.L.

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

2524

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL., HOW MANY*

23. INTERVALS DRILLED BY

ROTARY TOOLS

CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

NONE

25. WAS DIRECTIONAL SURVEY MADE

26. TYPE ELECTRIC AND OTHER LOGS RUN

BHC GAMMA RAY SONIC AND IES

27. WAS WELL CORED

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
10-3/4	32.0	244		175 SACKS	

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

30. TUBING RECORD

31. PERFORATION RECORD (Interval, size and number)

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED

33.*

PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD →	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE →	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED

TITLE

PRESIDENT

DATE

JANUARY 20, 1970

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments.

Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.
			<p>DST #1 - 2329-2410. OPEN 1 HR, SHUT IN 1 HR. REC 543 SLIGHTLY WATER CUT MUD. FP 79-290#; SIP 789-763#.</p> <p>DST's 2, 3, 4, 5 - MISRUNS</p> <p>DST #6 - 2329-2439. OPEN 2 HRS, SHUT IN 1 HR. REC 1989' MUD CUT WATER. FP 26-1055; SIP 1264-1264#.</p> <p>DST #7 - 2443-2474. OPEN 30 MIN, SHUT IN 1 HR. REC 1772' BLACK SULPHUR WATER. FP 468-885; SIP 885-885.</p>

38. GEOLOGIC MARKERS

NAME	TOP	
	MEAS. DEPTH	TRUE VERT. DEPTH
NAVAJO	357	
KAYENTA	926	
WINGATE	1278	
CHINLE	1609	
MOSSBACK	1866	
SHINARUMP	1962	
MOENKOPI	1984	
SINBAD	2300	
KAIBAB	2328	
WHITE RIM	2443	
T.D.	2524	

JAN 22 1970

5646
FORM OGC-8-X

FILE IN QUADRUPLICATE

STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL & GAS CONSERVATION
1588 West North Temple

SALT LAKE CITY, UTAH 8411

REPORT OF WATER ENCOUNTERED DURING DRILLING

Well Name & Number STATE BUCK CANYON #1
Operator KIMBARK OPERATING CO. Address 288 CLAYTON STREET
DENVER, COLORADO 80206 Phone 388-4021
Contractor CARMACK DRILLING CO. Address 1129 COLORADO
GRAND JUNCTION, COLO. Phone 243-3656
Location NE 1/4 SE 1/4 Sec. 32 T. 28 R. 12 E WAYNE County, Utah
S S W

Water Sands:

<u>Depth</u>		<u>Volume</u>	<u>Quality</u>
From	To	Flow Rate or Head	Fresh or Salty
1.	<u>NO WATER FLOWS</u>		
2.			
3.			
4.			
5.			

(Continued on reverse side if necessary)

Formation Tops:

Remarks:

NOTE: (a) Upon diminishing supply forms, please inform this office,
(b) Report on this form as provided for in Rule C-20, General Rules
and Regulations and Rules of Practice and Procedure, (See back of form)
(c) If a water analysis has been made of the above reported zone,
please forward a copy along with this form.